

# FINANCIAL DISCLOSURE STATEMENT CITY MANAGER, CITY ATTORNEY, CITY CLERK AND DEPARTMENT HEADS

PART I. IDENTIFYING INFORMATION

FIRST NAME: INITIAL: LAST NAME:

POSITION:

E-MAIL ADDRESS:

PART II. SIGNATURE

This Financial Disclosure Statement describes all interests and related transactions and matters required to be disclosed by the Rockville City Code Section 16-69, et seq. with respect to the period indicated and pertaining to the person filing this statement. The statement consists of this cover sheet and Schedules A through I. Financial Disclosure Statements must be annually filed with the City Clerk on or before April 30.

I hereby make oath or affirm under the penalties of perjury that the contents of this Financial Disclosure Statement are complete, true and correct to the best of my knowledge, information, and belief.

Signature of person filing: Date:

If you have any questions about your submission, please contact the City Attorney's Office at 240.314.8150

Date received by City Clerk's Office:

Print Name:

## PART III. DESIGNATED HOME ADDRESS AND INFORMATION ABOUT CERTAIN COMPENSATION

Designated Home Address:	
	oviding access to an address that an individual has nis page will be redacted from public disclosure if a nial disclosure statement.
You should not include your designated hom submit with this financial disclosure stateme	ne address on any Schedule or attachment that you nt.
	nestion 1.c. on Schedule A. An address or legal description ate of Maryland in which you have an interest must be
of all other addresses for real property in the St included in your response to Question 1.c. on S	chedule A.
* * ·	Iaryland Medical System; cal government in the State; or
Compensation from: (1) The University of M (2) A governmental entity of the State or a lo (3) a quasi-governmental entity of the State of The Rockville City Code, Section 16-46, was a Municipal Custodian from providing access to from the University of Maryland Medical Syste government in the State, or a quasi-government State. If you have such compensation, provide	Iaryland Medical System; cal government in the State; or or local government in the State.  mended in accordance with State law to prohibit the information you provide regarding compensation em, a government entity of the State or a local tal entity of the State or local government of the

#### **PART IV - SCHEDULES**

**Note**: With respect to Schedules A, B, and C, the following shall be considered to be the interests of the person making the statement:

- (1) Any interest held by the immediate family of the person making the statement, if such interest was at any time during the filing year directly or indirectly controlled by the person making the statement;
- (2) An interest held, at any time during the applicable period by:
- (i) a business entity in which the individual held a 10% or greater interest;
- (ii) a business entity described in section (i) of this subsection in which the business entity held a 25% or greater interest;
- (iii) a business entity described in section (ii) of this subsection in which the business entity held a 50% or greater interest; and
- (iv) a business entity in which the individual directly or indirectly, through an interest in one or a combination of other business entities, holds a 10% or greater interest.
- (3) Any interest held by a trust or estate, under which the person making the statement held a reversionary interest at any time during the filing year, or under which trust the person making the statement was at any time during that year a trustor, if a revocable trust, or a beneficiary.

## Schedule A – Real Property Interests (page one of two)

<u>A separate Schedule A is required for each real property interest disclosed</u>

Code Reference: Section 16-69(1)

Did you have any interest (including leasehold interests and interests in any oil, gas or other mineral royalty or lease) in real property in the State of Maryland during the reporting period? This includes ownership, leasing or rental of your residence, or of any other property anywhere in the State of Maryland.

Maryland.		
☐ Yes (Please complete questions below)	□ No (Go to Schedule B)	
Financial Disclosure Statement City Manager, City Attorney, City Clerk, and Department Heads; Schedule A (Page One of Two) Last		
Revised: February 2025		
	Name:	

1.		the nature of the property and the address or legal description of the property?  Nature of the property  Improved-if so, indicate whether property is  Residential Commercial
		Unimproved (vacant lot)
	b.	Is this property your designated home address?  ☐ Yes. If yes, proceed to Section 2 of this Schedule - do not complete Subsection c.  ☐ No. If no, complete Subsection c before proceeding to Section 2 of this Schedule.
	c.	Street Address or Legal Description
		sure Statement City Manager, City Attorney, City
	x, and Depar sed: Februar	tment Heads; Schedule A (Page One of Two) Last y 2025

Name:

## **Schedule A – Real Property Interests**

(page two of two)

2.			
	a.	On what date was the property interest acquired?	
		How was the property interest acquired?	
		(Example: purchase, gift, inheritance, etc.)	
	c.	From whom was the property acquired?	
3.	What co	nsideration was given when the property interest was acquir-	ed?
	(Dollar a	amount paid, or if you acquired the interest other than by purcha	ase, the fair market value at the
	time you	acquired your interest in the property)	
4.	Have yo	ur transferred, in whole or in part, any interest in this property of Yes  No	during the reporting period?
	If yes, th	en:	
	-	Describe the interest transferred:	
			_
	b.	What consideration did you receive for the interest?	
			-
	0	To whom did you transfer the interest?	
	c.	To whom did you transfer the interest?	
			-
5.	Identify	any other person with an interest in the property:	
			_
	ncial Disclos k, and Depar	ure Statement City Manager, City Attorney, City	
Sche	dule A (Pag	Two of Two) Last Revised: February 2025	
			Name:

#### Schedule B – Interests in Corporations and Partnerships

A separate Schedule B is required for each interest disclosed Code Reference: Section 16-69(2)

During the reporting period, did you have any interest in any corporation, partnership, limited liability partnership (LLP), or limited liability corporation (LLC) whether or not the corporation does business with the City?

2.	What is the nature and amount of the interest held, including any conditions to and encumbrances in the interest?  a.
	☐ In your name alone
	☐ Jointly (percentage of your interest):%
	b. What is the nature of your interest and its dollar value or the number of shares?
	(Example: stock, notes, bond, puts, calls, straddles, purchase options, etc.)
	Type:OR report equity interest below:
	If an equity interest in a non-publicly traded corporation – Number of Shares:
	If an equity interest in a partnership – Percentage of Ownership:
	c. Are there any legal conditions or encumbrances that apply to your interest in the entity: (Examples: mortgages, liens, contracts, options, etc.)
	Yes
	□ No
	If <u>yes</u> , name of entity holding the encumbrance
3.	Have you <u>transferred</u> any interest in this entity during the reporting period?
3.	Have you <u>transferred</u> any interest in this entity during the reporting period?  Yes
3.	Have you <u>transferred</u> any interest in this entity during the reporting period?  Yes No
3.	Have you <u>transferred</u> any interest in this entity during the reporting period?  Yes No  If <u>yes</u> , then:
3.	Have you <u>transferred</u> any interest in this entity during the reporting period?  Yes No  If <u>yes</u> , then:  a. Describe the interest transferred:
3.	Have you <u>transferred</u> any interest in this entity during the reporting period?  Yes No  If <u>yes</u> , then:  a. Describe the interest transferred:  b. What consideration did you receive for the interest transferred?
3.	Have you <u>transferred</u> any interest in this entity during the reporting period?  Yes No  If <u>yes</u> , then:  a. Describe the interest transferred:
3.	Have you <u>transferred</u> any interest in this entity during the reporting period?  Yes No  If <u>yes</u> , then:  a. Describe the interest transferred:  b. What consideration did you receive for the interest transferred?
3.	Have you <u>transferred</u> any interest in this entity during the reporting period?  Yes No  If <u>yes</u> , then:  a. Describe the interest transferred:  b. What consideration did you receive for the interest transferred?

### Schedule C – Interests in Any Other Business Entities **Doing Business with the City**

A separate Schedule C is required for each business entity disclosed Code Reference: Section 16-69(3)

Do you have an interest in any other business entity not reported on Schedule B that did business with the City of Rockville during the reporting period?

1.	Provide all names under which the entity in which you have an interest does business a as well as the name and address of the principal office of the business entity.
2.	What is the nature and amount of the interest held, including any conditions to and encumbrances in the interest?
	a.
	☐ In your name alone ☐ Jointly (percentage of your interest):%
	b. What is the nature of your interest and its dollar value or the number of shares? (Example: stock, notes, bond, puts, calls, straddles, purchase options, etc.)  Type:
	Dollar Value of Shares \$OR report equity interest below:
	If an equity interest in a non-publicly traded corporation – Number of Shares:  If an equity interest in a partnership – Percentage of Ownership:  c. Are there any legal conditions or encumbrances that apply to your interest in the entity?:  (Example: mortgages, liens, contracts, options, etc.)  Yes  No  If yes, name of entity holding the encumbrance:
3.	Have you transferred any interest in this entity during the reporting period?  Yes No If yes, then:  a. Describe the interest transferred:  b. What is the nature and amount of consideration you received for the interest transferred?

Financ Clerk

Name:	
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c.	To whom did you transfer the interest?	
in and District Control	City Manager City Att	
inancial Disclosure State Terk and Department He	ement City Manager, City Attorney, City ads Revised February 2025	
		Name:

#### Schedule D – Gifts

**Code Reference: Section 16-69(4)** 

During the reporting period, did you at any time receive any gift, in excess of twenty-five dollars (\$20) in value or a series of gifts totaling one hundred dollars (\$100) or more from any one person or from any other person at your direction, from, or on behalf of, directly or indirectly, from any person who does business with the City or is regulated by the City, including from an association, or any entity acting on behalf of an association that is engaged only in representing counties or municipal corporations, provided however that gifts received from parents, spouses, domestic partners or children, campaign contributions which are otherwise reported as required by law, and meals and beverages need not be disclosed.

gifts received from parents, spouses, domestic partners or children, campaign contributions which are otherwise reported as required by law, and meals and beverages need not be disclosed.			
☐ Yes (Please provide requested information below) ☐ No (Go to Schedule E)			
Name, Address and Affiliation of Donor	Description of Gift	Approximate Retail Value of Gift	
Please use additional sheet(s), if necessary, for any additional entries.			
Financial Disclosure Statement City Manager, City Attorney, City Clerk, and Department Heads; Schedule D Last Revised February 2025			

## Schedule E – Offices, Directorships, and Salaried Employment

Code Reference: Section 16-69(5)

During the reporting period, did you have any salaried employment or hold any office or directorship with a business entity that did business with the City? [Note: if you received compensation from an entity listed on in Section III above, note only that this information is provided in that Section].			
☐ Yes (Please provide reque	sted information below)	No (Go to Schedule F)	
Name and address of the principal office of the business entity	Nature and title of the office, directorship, or salaried employment you held	Total compensation received	
Please use additional sheet(s), if no	ecessary, for any additional entries.		
Financial Disclosure Statement City Manager, City Attorney, City Clerk, and Department Heads; Schedule E Last Revised: February 2025  Name:			

#### Schedule F – Liabilities

A separate Schedule F is required for each debt disclosed Code Reference: Section 16-69(6)

Did you, at some time during the period covered by this statement have any liabilities which were owed to any person doing business with the City, or did you at any time during the period covered by this statement, become involved in transactions giving rise to liabilities owed by your spouse, domestic partner or child to any person doing business with the City?

NOTE: You are not required to disclose liabilities owed in connection with retail credit accounts, consumer loans (\$1,500 or less) and automobile loans made by banks, savings and loan associations or credit unions. With regard to liabilities incurred in connection with transactions that you became involved in owned by your spouse or child, you are not required to disclose retail accounts, consumer loans (\$1,500 or less) and automobile loans made to your spouse or child by banks, savings and loan associations or credit unions. If, on Schedule A, B or C you listed a financial entity that did business with the City as the holder of your mortgage or other encumbrance, you must complete Schedule F with regard to that indebtedness.

	☐ Yes (Please complete questions below) ☐ No (Go to Schedule G)
1.	To whom was the liability owed?
	(Do not include retail accounts)
2.	What was the amount of the liability owed as of the end of the reporting period? If debt existed during the reporting period but was paid in full at the end of the period, put \$0.
	\$
3.	What are the terms of payment of the liability?
4.	Did the principal of the debt decrease or remain the same during the reporting period?
5. \$	If increased or decreased, by how much?
6.	Was any security given for the debt?  ☐ Yes ☐ No
	a. If yes, please state what type of security was given:
	incial Disclosure Statement City Manager, City Attorney, City k, and Department Heads; Schedule F Last Revised: February
	Name:

## Schedule G – Family Members Employed by the City

Code Reference: Section 16-69(7)

During the reporting period, were any members of your immediate family (spouse, domestic partner or dependent children) employed by the City in any capacity?				
Yes (Please provide requested information below)  No (Go to Schedule H)				
Name of Family Member	Relationship to You	Position / Title that Family Member Held		
Please use additional sheet(s), if no	ecessary, for any additional entries.			
Financial Disclosure Statement City Manager, C Clerk, & Department Heads; Schedule G; Last I 2025				
		Name:		

#### Schedule H - Sources of Income

Code Reference: Section 16-69(8)

Provide a schedule of all major sources of income (in excess of one thousand dollars (\$1,000)), <u>including your salary</u>, for the one year period ending the date of this statement, including identification of the source of the income, the nature of the income (whether salary, commission, interest, or other form of income) but not including the amount thereof. [Note: if you received compensation from an entity listed on in Section III above, note only that this information is provided in that Section].

Sources of Income in Excess of \$1,000	Nature of Income

Please use additional sheet(s), if necessary, for any additional entries.		
Financial Disclosure Statement City Manager, City Attorney, City Clerk, and Department Heads		
Schedule H Last Revised: February 2025		
	Name:	

### Schedule I – Other

Code Reference: Section 16-69(9)

In the space below, provide any additional information or interest you would like to disclose:	
Please use additional sheet(s), if necessary, for any additional entries.	
Financial Disclosure Statement City Manager, City Attorney, City	
Clerk, and Department Heads	
Schedule I Last Revised: February 2025	
	Name: